

STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

COVER PAGE

Please type or print in ink.

A PUBLIC DOCUMENT

AME OF FILER (LAST)	(FIRST)	7) (MIDDLE)
Ackerman	James	Benjamin
1. Office, Agency, or Court		- Fig. 7.
Agency Name (Do not use acronyms)	*	
Division of Oil, Gas & Geother	mal Resources	
Division, Board, Department, District, if	applicable	Your Position
Department of Conservation		Engineering Geologist
► If filing for multiple positions, list belo	ow or on an attachment. (Do not u	se acronyms)
Agency:	·	Position:
2. Jurisdiction of Office (Check	at least one box)	
X State		☐ Judge or Court Commissioner (Statewide Jurisdiction)
Multi-County		County of
☐ City of	•	Other
3. Type of Statement (Check at le	east one box)	
Annual: The period covered is Jan December 31, 2018.	nuary 1, 2018, through	Leaving Office: Date Left//
-or- The period covered is December 31, 2018.	, through	 The period covered is January 1, 2018, through the date of -or-
Assuming Office: Date assumed		The period covered is/, through the date of leaving office.
Candidate: Date of Election	and office sough	t, if different than Part 1:
4. Schedule Summary (must c	omplete) ► Total numbe	r of pages including this cover page:
Schedules attached	· ·	
Schedule A-1 - Investments – s	schedule attached	Schedule C - Income, Loans, & Business Positions – schedule attached
☐ Schedule A-2 - Investments – schedule attached ☐ Schedule D - Income – Gifts – schedule attached		
☐ Schedule B - Real Property — s	chedule attached	Schedule E - Income - Gifts - Travel Payments - schedule attached
-or- ⊠ None - No reportable in	terests on any schedule	
5. Verification		
MAILING ADDRESS STREET (Business or Agency Address Recommended - Pui	CITY blic Document)	STATE ZIP CODE
801 K Street, MS 20-20	Sacramer	nto CA 95814-3530
DAYTIME TELEPHONE NUMBER		EMAIL ADDRESS
(916) 322-9776		james.ackerman@conservation.ca.gov
I have used all reasonable diligence in p herein and in any attached schedules is		ewed this statement and to the best of my knowledge the information contained e this is a public document.
I certify under penalty of perjury und	er the laws of the State of California	rnia that the foregoing is true and correct.
Date Signed 4/2/2019		Signature MD
(month, day, ye	ar)	(File the originally signed paper statement with your filing official.)